REMARKS

The specification was objected to for including tables that are not suitable for publication as part of the specification. As was required by the Examiner, the Tables have been deleted from the specification and are submitted herewith as drawings. No new matter has been added.

Claims 13-16 were provisionally rejected under the judicially-created Doctrine of Obviousness-Type Double Patenting over claim 8 of co-pending application U.S. Serial No. 08/524,206, in view of Mudryj et al. (EMBO J. 9(7): 2179-2184, 1990). In response to this provisional rejection, applicants submit herewith a terminal disclaimer, which states that the term of any patent granted from the present application will not be longer than that of any patent granting from U.S. Serial No. 08/524,206. Also submitted is a copy of a Power of Attorney, appointing the undersigned, that was filed in connection with U.S. Serial No. 08/524,206, of which the present application is a continuation.

Mudryj was cited in the Office Action in support of the Examiner's provisional double patenting rejection. Applicants respectfully disagree, and would like to point out that, contrary to the Examiner's assertion, Mudryj does not render the instant claims obvious. This paper describes experiments showing a link between the E2F transcription factor and early proliferation-dependent control of transcription, but it does not describe the use of transcription factor decoys in any *in vivo* setting, not to mention the use of E2F decoys to inhibit proliferative lesion formation in blood vessels. Thus, the Mudryj paper does not support the present rejection. In view of the above, applicants respectfully request that this rejection be withdrawn.

CONCLUSION

Applicants submit that the claims are in condition for allowance, and such action is respectfully requested. If there are any charges or any credits, please apply them to Deposit Account No. 03-2095.

Respectfully submitted,

Date: November 20, 2002

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Page 6, lines 6 and 7, has been amended as follows.

Exemplary transcription factors and related cis elements, the cellular processes impacted, and therapeutic indications include[:] those listed in Figure 5.

Page 10, lines 20-23, has been amended as follows:

Optimal treatment parameters will vary with the indication, decoy, clinical status, etc., and are generally determined empirically, using guidance provided herein. Several exemplary indications, routes, [and] vehicles of administration, and decoy combinations are disclosed in Figure 6 [the following table].

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Figure 5

Cis-element Transcription Factor	Cellular Process	Therapeutic Application
E2F	cell proliferation	neointimal hyperplasia, neoplasia, glomerulonephritis, angiogenesis, inflammation
AP-1	cell growth, differentiation, growth factor expression	neointimal hyperplasia, cardiac myocyte growth/differentiation
NFκB	cytokine expression, leukocyte adhesion molecule expression, oxidant stress response, cAMP and protein kinase C activation, immunoglobulin expression	inflammation, immune response, transplant rejection, ischemia-reperfusion injury, glomerulonephritis
SSRE	response to shear stress: growth factor expression, vasoactive substances, matrix proteins, adhesion molecules	neointimal hyperplasia, bypass grafts, angiogenesis, collateral formation
CREB	cAMP response	cAMP activated events
MEF-2	cardiac myocyte differentiation and hypertrophy	cardiac myocyte growth and differentiation
CArG box	cardiac myocyte differentiation	cardiac myocyte growth and differentiation
tax	viral replication	HTLV infection
VP16	viral replication	Herpes infection
TAR/tat	viral replication	HIV infection
GRE/HRE MRE	glucocorticoid, mineralocorticoid induced events	steroid hormone processes, e.g., breast or prostate cell growth
Heat shock RE	heat shock response	cellular stresses, e.g., ischemia and hypoxia
SRE	growth factor responses	cell proliferation/differentiation
AP-2	cAMP and protein kinase response, retinoic acid response	cell proliferation
sterol response element	modulation of LDL cholesterol receptor expression	hypercholesterolemia
TRE TGFβ responsive element	Transforming growth factor beta-induced cellular processes	cell growth, differentiation, migration, angiogenesis, intimal hyperplasia, matrix generation, apoptosis

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Figure 6

INDICATION	ROUTE	VEHICLE	PLASMID/ OLIGONUCLEOTIDE
HIV infection	intravenous injection	gp160 in neutral liposomes	TAR containing oligonucleotide
solid tumor	intratumoral injection	tumor-specific antibody with liposomes	E2F
Inflammatory skin disease and dermatitis	topical	polymer	NFκB, E2F
Hypercholesterolemia	intravenous injection, portal vein injection	cationic liposomes asialoglycoprotein receptor targeting with liposomes	sterol responsive element to increase LDL receptors
vein bypass grafts	topical/intralumial	polymer, liposomes	E2F
glomerulonephritis	intravenous, intrarenal	polymer, liposomes	E2F, NFκB
myocardial infarction	intracoronary	liposomes, polymer	NFκB, E2F, AP-1
organ transplant, e.g., cardiac/renal	intravascular, ex vivo	liposomes, polymer	NFκB